

# LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.  
Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

141  
Lobbyist's Registration Number

## Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

## FOR OFFICE USE ONLY

Postmark Date: 1/2/98

REG

VA 0892  
\$10.00 1980646  
12/2/97

1. NAME OEBEN, Rudolph W.  
Last First MI
2. BUSINESS PHONE 281-263-1119  
Area Code and Phone Number
3. BUSINESS ADDRESS UNION CARBIDE Corp., Suite 400  
One Sugar Creek Center Blvd., Sugar Land, TX 77478  
Street and No. City State Zip
4. EMPLOYER UNION CARBIDE CORP.
5. EMPLOYER'S ADDRESS 39 Old Ridgebury Rd., Danbury, CT 06817  
Street and No. City State Zip

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Union Carbide Corporation  
Address 39 Old Ridgebury Rd., Danbury CT 06817  
Business or purpose Petrochemical Manufacturing  
Does this person pay you? Yes  
If No, who pays you? \_\_\_\_\_
2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

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3. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
4. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
5. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_

State of Texas  
Parish of FORT BEND

Before me, the undersigned authority, personally came and appeared Rudolph W. Oeben, who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Rudolph W. Oeben  
Signature of Lobbyist

Sworn to and subscribed before me on this 2nd day of  
January, 1998

Dottie Rainosek  
Notary Public

Rev. 8/97



ATTACH  
2" x 2"  
PHOTOGRAPH  
HERE  
FOR  
INITIAL  
REGISTRATION  
ONLY

